

**City of Menomonie**

**APPLICATION FOR PUBLIC DANCE HALL LICENSE**

Date: \_\_\_\_\_

Full name and home address of applicant: \_\_\_\_\_  
\_\_\_\_\_

Date of birth: \_\_\_\_\_

Telephone number: \_\_\_\_\_

If applicant is an organization, name of person in charge of hall: \_\_\_\_\_

Location of dance hall: \_\_\_\_\_

Name & address of property owner: \_\_\_\_\_  
\_\_\_\_\_

License expires: June 30, 200\_\_\_\_

\_\_\_\_\_  
**Applicant's Signature**

**FEE: \$55.00**

Account # - 01.43410

Receipt # \_\_\_\_\_

Copies to: Police Chief  
Fire Chief  
Building Inspector  
Health Officer

Date: \_\_\_\_\_